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DATE: March 31, 2006
TO: EXAMINER: Lawrence B. WILLIAMS FAX NO.: 571-273-2885
GAU: 2638
FROM: Adam D. Sheehan
Reg. No. 42,146
RE: **ISSUE FEE**

U.S. APP NO.: 10/017,688
FILING DATE: December 14, 2001
APPLICANT(S): John PIGOTT et al.
ATTY DKT NO.: 1280.SC11962ZC
TITLE: SYSTEM FOR PROVIDING A CALIBRATED CLOCK AND
METHODS THEREOF
NO. OF PAGES (INCL. COVER SHEET): 5

Attached please find:

- ☒ Transmittal Form (1 pg)
- ☒ Issue Fee Transmittal (1 pg) (in duplicate)
- ☒ Fee Address Indication Form (1 pg)

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)		Application Number	10/017,688
		Filing Date	December 14, 2001
		First Named Inventor	John PIGOTT
		Art Unit	2638
		Examiner Name	Lawrence B. WILLIAMS
Total Number of Pages In This Submission	4	Attorney Docket Number	1280.SC11962ZC

ENCLOSURES (Check all that apply)		
<input checked="" type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment/Reply <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Reply to Missing Parts/ Incomplete Application <input type="checkbox"/> Reply to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert to a Provisional Application <input type="checkbox"/> Power of Attorney, Revocation Change of Correspondence Address <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____ <input type="checkbox"/> Landscape Table on CD	<input type="checkbox"/> After Allowance Communication to TC <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to TC (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input checked="" type="checkbox"/> Other Enclosure(s) (please identify below): Fee Address Indication Form (1 pg)
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT		
Firm Name	LARSON NEWMAN ABEL POLANSKY & WHITE, LLP	
Signature		
Printed name	Adam D. Sheehan	
Date	March 31, 2006	Reg. No. 42,146

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